

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST	68207	9/9/00
O.I.P.E. CLASSIFIER	32	67369	9-14-00
FORMALITY REVIEW			2/18/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final Original		Final Original		Final Original	
1 37		1 63			
2 38		2 51		101	
3 39		3 52		102	
4 40		4 53		103	
5 41		5 54		104	
6 42		6 55		105	
7 43		7 56		106	
8 44		8 57		107	
9 45		9 58		108	
10 46		10 59		109	
11 47		11 60		110	
12 48		12 61		111	
13 49		13 62		112	
14 50		14 63		113	
15 51		15 64		114	
16 52		16 65		115	
17 53		17 66		116	
18 54		18 67		117	
19 55		19 68		118	
20 56		20 69		119	
21 57		21 70		120	
22 58		22 71		121	
23 59		23 72		122	
24 60		24 73		123	
25 61		25 74		124	
26 62		26 75		125	
27 63		27 76		126	
28 64		28 77		127	
29 65		29 78		128	
30 66		30 79		129	
31 67		31 80		130	
32 68		32 81		131	
33 69		33 82		132	
34 70		34 83		133	
35 71		35 84		134	
36 72		36 85		135	
37 73		37 86		136	
38 74		38 87		137	
39 75		39 88		138	
40 76		40 89		139	
41 77		41 90		140	
42 78		42 91		141	
43 79		43 92		142	
44 80		44 93		143	
45 81		45 94		144	
46 82		46 95		145	
47 83		47 96		146	
48 84		48 97		147	
49 85		49 98		148	
50 86		50 99		149	
				150	

If more than 150 claims or 10 actions
staple additional sheet here

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